

Image# 12954398350

PAGE 1 / 22

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Now or Never PAC

ADDRESS (number and street)

4131 N. Mulberry Dr

Suite 200

☐ Check if different than previously reported. (ACC)

Kansas City

MO

64116

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00513432

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

☐ PRE-Election
Report for the:☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

☐ POST-Election
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 19 2012

through

M M M / D D D / Y Y Y Y Y Y
09 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James C Thomas III

Signature of Treasurer

James C Thomas III

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 15 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Now or Never PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 19 2012 To: M M / D D / Y Y Y Y Y Y
09 30 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	450636.06	
(c) Total Receipts (from Line 19)	2255000.00	2739000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2705636.06	2739000.00
7. Total Disbursements (from Line 31)	1677219.48	1710583.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1028416.58	1028416.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Now or Never PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	19	/	2012

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

2255000.00

2689000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2255000.00

2689000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

50000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

2255000.00

2739000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

2255000.00

2739000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

2255000.00

2739000.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	16059.48	46212.07
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	3211.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16059.48	49423.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1626160.00	1626160.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	35000.00	35000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	35000.00	35000.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1677219.48	1710583.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1677219.48	1710583.42

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2255000.00	2739000.00
34. Total Contribution Refunds (from Line 28(d))	35000.00	35000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2220000.00	2704000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	16059.48	49423.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	16059.48	49423.42

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 22
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Now or Never PAC

Full Name (Last, First, Middle Initial)

A. Americans for Limited Government

Mailing Address 9900 Main St
Suite 303

City State Zip Code
Fairfax VA 22031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 17 2012

Transaction ID : SA11AI.4229

Amount of Each Receipt this Period

1000000.00

Full Name (Last, First, Middle Initial)

B. Americans for Limited Government

Mailing Address 9900 Main St
Suite 303

City State Zip Code
Fairfax VA 22031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 28 2012

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period

950000.00

Full Name (Last, First, Middle Initial)

C. Ron Firman

Mailing Address 247 SW 8th St
#301

City State Zip Code
Miami FL 33130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 06 2012

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

20000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1970000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 22
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Now or Never PAC

Full Name (Last, First, Middle Initial)

A. Herzog Contracting

Mailing Address P O Box 1089

City State Zip Code
 St Joseph MO 64502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 26 / 2012

Transaction ID : SA11AI.4225

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

B. Jerry Layman

Mailing Address 1 Sunset Drive

City State Zip Code
 Salem MO 65560

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 23 / 2012

Transaction ID : SA11AI.4220

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Peterbilt of Springfield, Inc.

Mailing Address 3026 N. Mulroy Rd

City State Zip Code
 Springfield MO 65757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 22

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Now or Never PAC

Full Name (Last, First, Middle Initial)

A. Rex Sinquefield

Mailing Address 244 Bent Walnut

City State Zip Code
 Westphalia MO 65085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

MM / DD / YYYY
 08 / 02 / 2012

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

B. Specialists in Urology PA

Mailing Address 990 Tamiami Trail North

City State Zip Code
 Naples FL 34102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

MM / DD / YYYY
 08 / 06 / 2012

Transaction ID : SA11AI.4266

Amount of Each Receipt this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Maxine Steelman

Mailing Address 38 County Rd 3220

City State Zip Code
 Salem MO 65560

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

MM / DD / YYYY
 07 / 26 / 2012

Transaction ID : SA11AI.4223

Amount of Each Receipt this Period

50000.00

SUBTOTAL of Receipts This Page (optional)..... ►

165000.00

TOTAL This Period (last page this line number only)..... ►

2255000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Now or Never PAC

Full Name (Last, First, Middle Initial)

A. Ron FirmanMailing Address 247 SW 8th St
#301

City Miami State FL Zip Code 33130

Purpose of Disbursement
refund of contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

Transaction ID : SB28A.4268

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

B. Specialists in Urology PA

Mailing Address 990 Tamiami Trail North

City Naples State FL Zip Code 34102

Purpose of Disbursement
refund of contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

Transaction ID : SB28A.4269

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35000.00

35000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 10 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Now or Never PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00513432 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee Campaign Grid		Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY </div>	
Mailing Address 414 Commerce Drive Suite 100		Amount <div style="border: 1px solid black; padding: 2px;"> 15000.00 </div>	
City Ft Washington	State PA	Zip Code 19034	Transaction ID : SE.4190
Purpose of Expenditure media advertising	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Joe Walsh		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Campaign Grid		Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY </div>	
Mailing Address 414 Commerce Drive Suite 100		Amount <div style="border: 1px solid black; padding: 2px;"> 15000.00 </div>	
City Ft Washington	State PA	Zip Code 19034	Transaction ID : SE.4192
Purpose of Expenditure media advertising	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 30000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James C Thomas III

[Electronically Filed]

Signature

Date

MM / DD / YYYY

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 11 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Now or Never PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00513432 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Candidate Command, LLC		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 25 / 2012 </div>
Mailing Address 1831 NW Vivion Rd Suite 101		Amount <div style="border: 1px solid black; padding: 2px;"> 74670.00 </div>
City Riverside State MO Zip Code 64150		
Purpose of Expenditure media advertising	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Joe Walsh		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4200

Full Name (Last, First, Middle Initial) of Payee Chatham Light Media LLC		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 30 / 2012 </div>
Mailing Address P O Box 1330		Amount <div style="border: 1px solid black; padding: 2px;"> 3005.00 </div>
City Stowe State VT Zip Code 05672		
Purpose of Expenditure media production	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: SARAH H STEELMAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4159

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 77675.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James C Thomas III

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 12 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Now or Never PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00513432 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Chatham Light Media LLC		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 30 / 2012 </div>
Mailing Address P O Box 1330		Amount <div style="border: 1px solid black; padding: 2px;"> 3005.00 </div>
City State Zip Code Stowe VT 05672	Transaction ID : SE.4160	
Purpose of Expenditure media production	Category/Type 004	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN BRUNNER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Chatham Light Media LLC		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 06 / 2012 </div>
Mailing Address P O Box 1330		Amount <div style="border: 1px solid black; padding: 2px;"> 31205.00 </div>
City State Zip Code Stowe VT 05672	Transaction ID : SE.4170	
Purpose of Expenditure media production	Category/Type 004	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN BRUNNER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 34210.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James C Thomas III

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 13 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Now or Never PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00513432 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee Chatham Light Media LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>	
Mailing Address P O Box 1330		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 15000.00 </div>	
City Stowe	State VT	Zip Code 05672	Transaction ID : SE.4171
Purpose of Expenditure media production	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House State: <u>MO</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SARAH H STEELMAN			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Chatham Light Media LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>	
Mailing Address P O Box 1330		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 17500.00 </div>	
City Stowe	State VT	Zip Code 05672	Transaction ID : SE.4189
Purpose of Expenditure media advertising	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Joe Walsh			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 32500.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James C Thomas III

[Electronically Filed]

Signature

 Date MM / DD / YYYY

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 14 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Now or Never PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00513432 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Kinetic 5		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 02 / 2012 </div>
Mailing Address 1442 S Glenstone		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 2550.00 </div>
City Springfield	State MO	
Zip Code 65804	Transaction ID : SE.4165	
Purpose of Expenditure media production	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN BRUNNER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Media Placement Technologies		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 25 / 2012 </div>
Mailing Address 336 Commerce Street		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 217675.00 </div>
City Alexandria	State VA	
Zip Code 22314	Transaction ID : SE.4142	
Purpose of Expenditure Media buy	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Duckworth		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 220225.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James C Thomas III

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 15 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Now or Never PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00513432 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Media Placement Technologies		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 26 / 2012 </div>
Mailing Address 336 Commerce Street		Amount <div style="border: 1px solid black; padding: 2px;"> 171400.00 </div>
City Alexandria	State VA	
Purpose of Expenditure Media buy	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>MO</u> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: SARAH H STEELMAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4145

Full Name (Last, First, Middle Initial) of Payee Media Placement Technologies		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 02 / 2012 </div>
Mailing Address 336 Commerce Street		Amount <div style="border: 1px solid black; padding: 2px;"> 250000.00 </div>
City Alexandria	State VA	
Purpose of Expenditure media buy	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>MO</u> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN BRUNNER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4164

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 421400.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James C Thomas III

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 16 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Now or Never PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00513432 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Media Placement Technologies		Date 09 / 17 / 2012	
Mailing Address 336 Commerce Street		Amount 810150.00	
City Alexandria	State VA		
Purpose of Expenditure media advertising		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IL</u> District: <u>08</u>
Name of Federal Candidate Supported or Opposed by Expenditure: Joe Walsh		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4185

Full Name (Last, First, Middle Initial) of Payee		Date / / 	
Mailing Address		Amount 	
City	State		
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u> </u> District: <u> </u>
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

(a) SUBTOTAL of Itemized Independent Expenditures.....	810150.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	1626160.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James C Thomas III

[Electronically Filed]

Signature

Date

10 / 15 / 2012

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 17 OF 22

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Now or Never PAC

A. Full Name (Last, First, Middle Initial) Graves Bartle Marcus & Garrett			Transaction ID : H4.4210			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 1100 Main Suite 2700						Allocated Activity or Event Year-To-Date <div>32232.21</div>			
City Kansas City		State MO		Zip Code 65105					
Purpose of Disbursement: Formation and organization of a Super PAC						Date <div>MM / DD / YYYY</div> <div>07 / 23 / 2012</div>			
Activity or Event Identifier: Administrative									
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
<div>2079.62</div>				<div>0.00</div>				<div>2079.62</div>	

B. Full Name (Last, First, Middle Initial) Harcom Strategies			Transaction ID : H4.4211			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 6019 Terrapin Place						Allocated Activity or Event Year-To-Date <div>37232.21</div>			
City Alexandria		State VA		Zip Code 22310					
Purpose of Disbursement: Press and public relations for July and August						Date <div>MM / DD / YYYY</div> <div>07 / 24 / 2012</div>			
Activity or Event Identifier: Administrative									
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
<div>5000.00</div>				<div>0.00</div>				<div>5000.00</div>	

C. Full Name (Last, First, Middle Initial) Commerce Bank			Transaction ID : H4.4235			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 1000 Walnut						Allocated Activity or Event Year-To-Date <div>37262.21</div>			
City Kansas City		State MO		Zip Code 64106					
Purpose of Disbursement: wire transfer charge - outgoing						Date <div>MM / DD / YYYY</div> <div>07 / 25 / 2012</div>			
Activity or Event Identifier: Administrative									
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
<div>30.00</div>				<div>0.00</div>				<div>30.00</div>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div>7109.62</div>		<div>0.00</div>		<div>7109.62</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div></div>	<div></div>	<div></div>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 18 OF 22

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Now or Never PAC

A. Full Name (Last, First, Middle Initial) Commerce Bank		Transaction ID : H4.4237		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1000 Walnut					
City Kansas City	State MO	Zip Code 64106			
Purpose of Disbursement: wire transfer charges - outgoing and incoming				Allocated Activity or Event Year-To-Date 37303.21	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.00			0.00		41.00

B. Full Name (Last, First, Middle Initial) Law office of James Thomas III		Transaction ID : H4.4214		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4131 N. Mulberry Drive Suite 200					
City Kansas City	State MO	Zip Code 64116			
Purpose of Disbursement: Legal services				Allocated Activity or Event Year-To-Date 39607.21	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2304.00			0.00		2304.00

C. Full Name (Last, First, Middle Initial) Commerce Bank		Transaction ID : H4.4238		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1000 Walnut					
City Kansas City	State MO	Zip Code 64106			
Purpose of Disbursement: wire transfer charges - outgoing				Allocated Activity or Event Year-To-Date 39667.21	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00			0.00		60.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2405.00		0.00		2405.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 19 OF 22

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Now or Never PAC

A. Full Name (Last, First, Middle Initial) Commerce Bank		Transaction ID : H4.4240		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1000 Walnut					
City Kansas City	State MO	Zip Code 64106			
Purpose of Disbursement: wire transfer charge - incoming				Allocated Activity or Event Year-To-Date 39678.21	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="11.00"/>			<input type="text" value="0.00"/>		<input type="text" value="11.00"/>

B. Full Name (Last, First, Middle Initial) Commerce Bank		Transaction ID : H4.4241		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1000 Walnut					
City Kansas City	State MO	Zip Code 64106			
Purpose of Disbursement: wire transfers - incoming				Allocated Activity or Event Year-To-Date 39700.21	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="22.00"/>			<input type="text" value="0.00"/>		<input type="text" value="22.00"/>

C. Full Name (Last, First, Middle Initial) Commerce Bank		Transaction ID : H4.4242		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1000 Walnut					
City Kansas City	State MO	Zip Code 64106			
Purpose of Disbursement: wire transfer - outgoing				Allocated Activity or Event Year-To-Date 39760.21	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="60.00"/>			<input type="text" value="0.00"/>		<input type="text" value="60.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="93.00"/>		<input type="text" value="0.00"/>		<input type="text" value="93.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 20 OF 22

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Now or Never PAC

A. Full Name (Last, First, Middle Initial) Taylor Garrett		Transaction ID : H4.4215		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1800 Main St Suite 1354					
City Dallas	State TX	Zip Code 75201			
Purpose of Disbursement: Retainer for August				Allocated Activity or Event Year-To-Date 40098.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 21 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
338.70			0.00		338.70

B. Full Name (Last, First, Middle Initial) Graves Bartle Marcus & Garrett		Transaction ID : H4.4216		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1100 Main Suite 2700					
City Kansas City	State MO	Zip Code 65105			
Purpose of Disbursement: Consulting services				Allocated Activity or Event Year-To-Date 41437.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1339.00			0.00		1339.00

C. Full Name (Last, First, Middle Initial) Law office of James Thomas III		Transaction ID : H4.4217		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4131 N. Mulberry Drive Suite 200					
City Kansas City	State MO	Zip Code 64116			
Purpose of Disbursement: Legal Services				Allocated Activity or Event Year-To-Date 44457.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3019.16			0.00		3019.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4696.86		0.00		4696.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 21 OF 22

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Now or Never PAC

A. Full Name (Last, First, Middle Initial) Kinetic 5		Transaction ID : H4.4218		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1442 S Glenstone					
City Springfield	State MO	Zip Code 65804			
Purpose of Disbursement: Website hosting				Allocated Activity or Event Year-To-Date 44507.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 14 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
50.00			0.00		50.00

B. Full Name (Last, First, Middle Initial) Commerce Bank		Transaction ID : H4.4243		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1000 Walnut					
City Kansas City	State MO	Zip Code 64106			
Purpose of Disbursement: wire transfer charges - incoming and outgoing				Allocated Activity or Event Year-To-Date 44548.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 17 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
41.00			0.00		41.00

C. Full Name (Last, First, Middle Initial) Commerce Bank		Transaction ID : H4.4244		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1000 Walnut					
City Kansas City	State MO	Zip Code 64106			
Purpose of Disbursement: wire transfer charge - outgoing				Allocated Activity or Event Year-To-Date 44578.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
30.00			0.00		30.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.00		0.00		121.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Now or Never PAC

A. Full Name (Last, First, Middle Initial) Graves Bartle Marcus & Garrett			Transaction ID : H4.4219			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC								
Mailing Address 1100 Main Suite 2700						Allocated Activity or Event Year-To-Date <div>46200.07</div>								
City Kansas City		State MO		Zip Code 65105										
Purpose of Disbursement: Consulting services and research						Date <div>09</div> / <div>25</div> / <div>2012</div>								
Activity or Event Identifier: Administrative														
FEDERAL SHARE			+			NONFEDERAL SHARE			=			TOTAL AMOUNT		
<div>1622.00</div>						<div>0.00</div>						<div>1622.00</div>		

B. Full Name (Last, First, Middle Initial) Commerce Bank			Transaction ID : H4.4245			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC								
Mailing Address 1000 Walnut						Allocated Activity or Event Year-To-Date <div>46212.07</div>								
City Kansas City		State MO		Zip Code 64106										
Purpose of Disbursement: wire transfer charge - incoming						Date <div>09</div> / <div>28</div> / <div>2012</div>								
Activity or Event Identifier: Administrative														
FEDERAL SHARE			+			NONFEDERAL SHARE			=			TOTAL AMOUNT		
<div>12.00</div>						<div>0.00</div>						<div>12.00</div>		

C. Full Name (Last, First, Middle Initial)						Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC								
Mailing Address						Allocated Activity or Event Year-To-Date <div></div>								
City		State		Zip Code										
Purpose of Disbursement:						Date <div></div> / <div></div> / <div></div>								
Activity or Event Identifier:														
FEDERAL SHARE			+			NONFEDERAL SHARE			=			TOTAL AMOUNT		
<div></div>						<div></div>						<div></div>		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div>1634.00</div>		<div>0.00</div>		<div>1634.00</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div>16059.48</div>		<div>0.00</div>		<div>16059.48</div>